

# APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS

**John A. Gale**, Secretary of State  
Room 1301 State Capitol, P.O. Box 94608  
Lincoln, NE 68509  
*<http://www.sos.state.ne.us>*

Submit in Duplicate

Attach a certificate of good standing duly authenticated by the official having custody of the corporate records in the state or country under whose law the corporation is incorporated. Such certificate shall not be more than 60 days old. A certified copy of the articles of incorporation should not be submitted and is not acceptable in lieu of such certificate.

Name of Corporation \_\_\_\_\_

Fictitious Name of Corporation \_\_\_\_\_  
(to be used only if actual corporate name is unavailable for use or does not comply with Nebraska law)

Incorporated under the laws of \_\_\_\_\_

Date Incorporation \_\_\_\_\_, \_\_\_\_\_  
Year

Period of Duration \_\_\_\_\_

Address of Principal Office \_\_\_\_\_  
Street Address City State Zip

Registered Agent \_\_\_\_\_

Registered Office \_\_\_\_\_ NE \_\_\_\_\_  
Street Address and Post Office Box (if any) City Zip

DATED \_\_\_\_\_  
Signature

Printed Name/Title

NOTE: The Business Corporation Act requires that every filing be signed by the chairperson of the board of directors, the president, or one of the officers of the corporation. If the corporation has not yet been formed or directors have not yet been selected, the filing shall be signed by an incorporator. If the corporation is in the hands of a receiver, trustee, or other court appointed fiduciary, the filing shall be signed by that fiduciary.

NOTE: To complete this form, you must list officers and directors on back

FILING FEE: \$145.00 (if you have more than one page listing officers and directors please add \$5.00 a page for each additional page)

**OFFICERS:**

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Name/Title

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Street Address

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Name/Title

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Street Address

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Name/Title

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Street Address

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Name/Title

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Street Address**DIRECTORS:**

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Name

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Street Address

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Name

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Street Address

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Please Copy this page and submit additional pages if needed.